



Your Family Bank. Across India.

(Regd. &amp; Head Office, Mangalore – 575 002)

## SAVING BANK/ CURRENT ACCOUNT

To:  
The Branch Head,  
Karnataka Bank Ltd.,

Branch.

Customer Id No.:

Account No.:

*Account Opening Form*

I / We request you to open an operative account in my / our name as under:  
(Fields with (\*) are mandatory.)

Type of Account:  ▼ \*

Name of the firm:

Applicant's  
Latest Photograph.

### Personal Information

Full Name:   \*

Gender:  ▼ \*

Date of Birth:  \*  
(If the Applicant is Minor,  
Details to be filled)

Caste / Community:  \*

Communication Address:  \* Permanent Address:  \*

City:  \* City:  \*

Pin code:  \* Pin code:  \*

State:  \* State:  \*

Country:  \* Country:  \*

Telephone:  Telephone:

E mail Id:

Education:  \*

Marital Status:  ▼ \* Anniversary Date:

Spouse Name:  \*

Employment Status:	<input type="text" value="Employed / self Employed etc. ▼"/>	*	Employment Sector	<input type="text" value="Public / Pvt. Etc. ▼"/>	*
Employer's Name:	<input type="text"/>	*			
Address:	<input type="text"/>	*	City:	<input type="text"/>	*
Pin code:	<input type="text"/>	*	State:	<input type="text"/>	*
Country:	<input type="text"/>	*	Telephone:	<input type="text"/>	*
<b>If Professional:</b>					
Name of the Profession:	<input type="text" value="CA/ Engineer/ Doctor etc. ▼"/>	*			
Monthly Income:	<input type="text"/>	*			

*Joint Holder Details*

	<b>Joint Holder1</b>	<b>Joint Holder2</b>	<b>Joint Holder3</b>
Name*:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Relationship*:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address*:	<input type="text"/>	<input type="text"/>	<input type="text"/>
City*:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Pin code*:	<input type="text"/>	<input type="text"/>	<input type="text"/>
State*:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country*:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone:	<input type="text"/>	<input type="text"/>	<input type="text"/>
E mail Id:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Occupation*:	<input type="text"/>	<input type="text"/>	<input type="text"/>

Latest Photograph  
Of Jt. H. 1

Latest Photograph  
Of Jt. H. 2

Latest Photograph  
Of Jt. H. 3

## Account Details

Frequency of Statements:

Monthly / Quarterly etc. ▼ \*

Mode of Operation:

Jointly / severally etc. ▼ \*

## Customer Tax Details

TDS to be deducted  
If applicable:

YES / NO ▼

If No,

TDS exempt end date:  
(Form 15G to be submitted every  
Financial Year)

TDS exempt Ref. No.

TDS exempt  
submission date:

Tax slab:

▼

TDS Customer Id:

PAN / GIR No.

(Form 60/61 to be filled by those who  
do not have whether PAN or GIR)

Reason for not:  
having PAN / GIR

(If not having)

Are You a Tax Assessee? :

YES/NO ▼ \*

If Yes; Ward/Circle/Range where the  
last Return of Income was filed:

## TDS Operative Account

(Account to which applicable TDS is to be debited)

Whether Debited to Same Account:

YES/NO ▼

If any other Account,  
Nature of the Account:

Account No:

Nomination Required:

(If Yes, Fill the Nomination Form)

YES/NO ▼ \*

Nominee Name on the  
Pass Book required:

YES / NO ▼ \*

*Introduction*

*Introducer's Details:*

Name:	<input type="text"/>	*		
Address:	<input type="text"/>	*	City:	<input type="text"/>
Pin Code:	<input type="text"/>	*	State:	<input type="text"/>
Country:	<input type="text"/>	*	Telephone:	<input type="text"/>
Occupation:	<input type="text"/>	*		
Account No:	<input type="text"/>		Branch:	<input type="text"/>

*Declaration by the Introducer*

I ..... confirm that, Mr./Mrs./Ms.....  
Is personally known to me since last.....years and confirm his/her/their occupation(s)  
and address(es) as above.

Account No. of the Introducer:.....  
.....  
Introducer's Signature

*Details for the Minor Accounts*

Guardian Type:	<input type="text" value="Father / Mother / Court Appointed ▼"/>	*		
Name of the Guardian:	<input type="text"/>	*		
Address:	<input type="text"/>	*	City:	<input type="text"/>
Pin code:	<input type="text"/>	*	State:	<input type="text"/>
Country:	<input type="text"/>	*	Telephone:	<input type="text"/>

**Declaration by the Guardian**

I hereby declare that the date of birth of the minor who is my..... is ..... And I am his/her natural and lawful guardian appointed by Court order dated..... (copy enclosed). I shall represent the said minor in all future transactions of any description in the above account until the said minor attains majority. I indemnify the bank against the claim of the above minor for any withdrawal/transactions made by me in his/her account.

.....  
Signature of Guardian

**Nomination Form**

Nomination under section 45ZA of the Banking Regulation Act 1949 & Rule 2(1) of the Banking Companies (Nomination) Rule, 1985 in respect of Bank Deposits.

I / We (Name).....  
Nominate the following person to whom in the event of my/our/minor's death the amount of deposit in the above account, may be returned by Karnataka Bank Ltd.

**NOMINEE (Only One nominee permitted)**

Name*	Address*	Relationship with Depositor If any*	Age*	If he is a minor, his/her date of birth*
		▼		

**If the Nominee is a Minor**

As the Nominee is a Minor on this date, I / We appoint (Name).....  
Address.....  
To receive the amount of the deposit in the Account on behalf of the nominee in the event of my/our/minor's death during the minority of the Nominee.

.....  
Signature of Witness\$:

.....  
\$#Signature(s)/Thumb Impression(s) of Depositor(s)

Name:

Address:

Name:

Address:

\$Thumb Impression(s) shall be attested by two persons.

\$#Where deposit is made in the name of a minor, the nomination should be signed by a Person lawfully entitled to act on behalf of the minor.

*Declaration*

- I/We have read and understood the Rules of the deposit scheme and agree to comply with and be bound by Bank/s rules in force and any amendments thereto from time to time. I/We authorize the Bank to verify the details given herein through any third party as necessary.
- I/WE authorize you to collect the cheques/Drafts etc., handed over to you for collection/negotiation as per rules of the Bank at our risk and responsibility and indemnify you for any loss suffered by you in the matter due to any cause. I also authorize you to recover your Commission, Debit, Balance in the Account caused at our request or otherwise with Interest applicable rates and Incidental Charges.
- In the event of death of any of us, Bank shall be at liberty to make premature payment of the deposit or grant loan there against to the survivor/s without the concurrence of the legal heirs of the deceased.
- Kindly supply me/us cheque book as per rules
- I/We do not enjoy any credit facility with any other Bank/Branch
- I/We enjoy credit facilities / have current account with other Bank/s.
- I hereby declare that I am the sole Proprietor/Proprietrix of the aforesaid concern
- I/We hereby declare that the amount deposited belong to me / us absolutely and it has been deposited in joint names/ Minor's name for the purpose of convenience only
- The purpose of maintaining the Account is

SIGNATURE:

1. Applicant: .....

2. Joint Holder 1: .....

3. Joint Holder 2: .....

4. Joint Holder 3: .....

Place: .....

Date: .....

## *Documents Required*

- Proof of Identity like Passport/Photo credit card/Banker's Verification/Election Id Card/PAN card/Govt. Id card/Driving License  
(For Joint accounts all the above documents are required for both, applicant as well as the joint applicant/s, unless the joint applicant/s is/are a blood relative/s of the applicant. A Blood Relative is defined as Parents, Spouse, Children and sibling)
- Two Passport size Photographs
- Address Proof. (Like Telephone Bill, Electricity Bill, Ration Card, Residence Agreement Copy etc.)
- Proper Introduction.

## *Additional Documents Required*

### **For Partnership Firm:**

- Partnership Deed.

### **For Companies:**

- Memorandum and Articles of association duly certified to be correct and up-to-date.
- Copy of the certificate of incorporation.
- Copy of the certificate of commencement of Business in case of Public Limited Companies.
- Balance Sheet for the last THREE Years.
- True extracts of Resolutions duly certified by the Chairman, counter-signed by the secretary or any other Authorised Officer.
  - (a) Authorising to apply for / to raise accommodation.
  - (b) Authorising persons to execute required loan documents and to operate upon accounts.
  - (c) Authorising the company to offer the securities to secure the accommodation.
- Latest list of Directors.